



50X1-HUM

S-E-C-R-E-T

6. The following conditions contraindicate inoculation: acute diseases accompanied by high temperature; subcompensated and decompensated heart conditions; tuberculosis in an active form; acute chronic diseases of internal organs (kidneys, liver, etc.); pronounced hypertension; swelling and tenderness of lymphatic glands; recent recovery from a disease; pregnancy (second half).

Note: Chronic malaria is not a contraindication, provided that quinine or atabrin have been administered previously.

7. Inoculations are carried out in a room which is protected from dust. No more than two or three persons are admitted to this room [at the same time].

8. Preparation of the vaccine for inoculation is carried out in the following manner: After the tip of the ampule has been heated over the flame of an alcohol burner, a drop of water is placed on the hot glass, whereupon the glass cracks and breaks off. After the ampule has been opened, one cubic meter of a physiological solution is introduced into it by means of the needle of a sterile syringe. The ampule is then shaken in order to obtain a homogeneous suspension. The microbe suspension formed in the ampule is then taken up by means of a sterile pipette or a syringe with a long needle and transferred into a sterile flask or bottle. The suspension is thereupon diluted further with physiological salt solution, so as to obtain a suspension containing 1.5 billion bacterial bodies per one cubic centimeter.

Note: The quantity of sterile physiological solution which should be used for diluting the contents of the ampule is indicated on the label.

9. The inoculation is carried out once. The dose is one cubic meter of diluted vaccine.

Note: Children younger than 10 years receive one third of the dose administered to adults; children between 10-15 years, one half of the dose administered to adults. After the age of 15 years, the full dose is administered.

10. Before dilution of the vaccine and after, the ampules are carefully inspected. Ampules exhibiting the following conditions are subject to rejection: (a) cracks in the glass; and (b) presence of undissolved lumps, films, or extraneous occlusions.

Note: Ampules which have been rejected must be returned to the institute.

11. The vaccine is diluted on the day on which the inoculation is carried out. The prepared (diluted) vaccine, under ordinary conditions of storage, is effective for a period of 8-10 hr. Vaccine which has not been used is destroyed by ordinary disinfectant solutions or by boiling for 30 min.

12. The vaccine should be inoculated by means of a sterile syringe. Boiling out of the needle of the syringe after every inoculation is indispensable.

13. The vaccine should be introduced under the skin of the back at the lower corner of the shoulder blade. Prior to the inoculation, the skin is treated with alcohol and ether, then swabbed with iodine. After the injection, an absorbent cotton ball moistened with iodine is applied to the site of the injection immediately after the needle is withdrawn.

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14. After the inoculation, a local and general reaction may occur.

15. A general reaction expresses itself in indisposition, headaches, and a rise of temperature -- most frequently to 37.5° C, more rarely to 38-39° C, and in individual cases to 39° C. In rare cases, nausea and vomiting are observed. The general symptoms are observed during the first 24 hr and disappear within 24-48 hr.

16. A local reaction occurs in almost all cases and is expressed in swelling, redness, and tenderness at the site of the injection. More seldom, the regional [local] glands swell. All these symptoms begin to develop 6-10 hr after the inoculation (rarely within 2-3 days) and usually disappear within 5-8 days.

17. If the reaction is strong, the persons who have been inoculated are freed from occupational activities.

Neither in cases of a local or general reaction is any therapeutic interference necessary. If there is a strong general reaction, the person is placed in a stationary hospital.

18. Those who have been inoculated are kept under medical observation. The registration of persons who have been inoculated must be carried out according to established procedure and is obligatory.

19. In organizing inoculations with EV vaccine (as far as indications, execution, statistics, etc., are concerned), one should be guided by "Regulations and Instructions for Anti plague Public Health Establishments," 1937, pp 50-52. -- Confirmed by the Scientific Council of the Institute, 22 September 1948

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